

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
ANTONIO S. CAMACHO

COURT CASE NUMBER
CA 05-0043 USDC NMI

DEFENDANT
CNMI DEPT OF PUBLIC LANDS & CNMI DEPT OF PUBLIC WORKS

TYPE OF PROCESS
WRIT OF EXECUTION

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
First Hawaiian Bank - Victoria B. Concepcion Asst Vice President & Oleai Branch Manager or Designate
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
PO BOX 500625 Saipan MP 96950 / 670-236-8920 TEL / 670-236-8910 FAX

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Number of process to be served with this Form 285

1

Number of parties to be served in this case

5

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

Located in Oleai Village at the Oleai Center on Beach Rd. adjacent to Joeten Ford & Pacific Medical Center
Other contact information: vconcepcion@fhb.com or www.fhb.com

Checks up to the full amount of the Judgment, as shown on the Writ of Execution, should be made out to the following:
"Trust Account of O'Connor Berman Dotts & Banes".

Signature of Attorney other Originator requesting service on behalf of:

PLAINTIFF

TELEPHONE NUMBER

DATE

DEFENDANT

670-234-5684

10/27/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin
No. 005

District to Serve
No. NMI

Signature of Authorized USMS Deputy or Clerk

Date

10/28/08

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Patricia Camacho Service Mgr.

A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date

10/28/08

Time

1450

am
 pm

Signature of U.S. Marshal or Deputy

28/10/08 C. Durom #308C

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund*)
\$45.00	\$5.00		\$50.00	\$50.00	\$0.00

REMARKS:

\$45.00 Service & \$5.00 mileage Fee's in advance; Adjustments for additional billing or refunds upon completion of service.

N

PRINT 5 COPIES: 1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

RECEIVED

OCT 28 2008

Form USM-285
Rev. 12/80

US MARSHALS SERVICE-CNMI